No. C 137104	Due no later than Jan 31, 2002 Annual Report Form 1. Mailing Address - Correct in this box, if applicable ALAN OLMSTEAD M.D. CHTD 844 WASHINGTON ST N STE 100		2. Registered Agent and Office NO PO BOX ALAN OLMSTEAD 844 WASHINGTON ST N STE 100 TWIN FALLS, ID 83301	
Return to: SECRETARY OF STATE				
700 WEST JEFFERSON				
PO BOX 83720 BOISE, ID 83720-0080				
NO FILING FEE IF RECEIVED BY DUE DATE	TWIN FALLS, ID 83301	3. <u>Nev</u>	v Registered Ager	nt Signature
	ames and Business Addresses of Presider	nt, Secretary and	Directors.	
Office held Name	Street or P.O. Address	City	<u>State</u>	<u>Zip</u>
	mstead 3133 E 3500 N	Twin Falls	IT	83301
Secretary Laurie	mstead 3133 E 3500 N Simonds "	\\	11	"
5. Organized Under the Laws of:	6. Signature		Date\-	-17-02
IDAHO		1 1	•	sident
C 137104	Name Printed Alan Olm	stend	Title _ <u>ઉγ</u> ε	7106N1
	Do Not Tape or Staple			948